PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09909858

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			15					RATE	FEE		RATE	FEE
FOR NUMBER FILED					NUMBI	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS / 5 minus 2								X\$ 9=		OR	X\$18=	A
INDEPENDENT CLAIMS					•			X40=		OR	X80=	80
MULTIPLE DEPENDENT CLAIM PRESENT							Ì	+135=		OR	+270=	Ø
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	l	TOTAL		OR	TOTAL	790
CLAIMS AS AMENDED					- PART II					1	OTHER	
					olumn 2) (Column 3)			SMALL E		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		±		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN.	T CLAIM		!	+135=		OR	+270=	
								TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3								ADDIT. FEE		JOIN	ADDIT. FEE	
_		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 1		ADDI-	1	<u> </u>	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	•••		=	11	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		ן	+135=			+270=	
								TOTAL		OR	TOTAL	
							,	ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)		_		_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	••		=]	X\$ 9=		OR	X\$18=	
	Independent		Minus	•••		=		X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDE			PENDEN	T CLAIM]					
	16 Ab a A * 4		lha anto in c-t	ئىنىن 0 مىسى	to "O" in	olumo 3		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
"	The "Highest Nur	imber Previously i nber Previously P	aid For" (Total o	or Indepen	dent) is th	e highest numb	er foi	und in the ap	propriate bo	x in co	olumn 1.	